



In re Application of

RAMESH MANTHA

Application No.: 09/722,568

Filed: November 28, 2000

For: METHOD, SYSTEM AND APPARATUS
FOR IMPROVING RECEPTION IN
MULTIPLE ACCESS COMMUNICATION
SYSTEMS

Docket No.: 213222.00015

Examiner: Danh C. Le

Group Art Unit: 2683

Confirmation No.: 9254

Date: April 6, 2004

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Technology Center 2600

MAIL STOP FEE AMENDMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment and Petition for Extension of Time in the above-identified application.

☒ An additional fee is required.

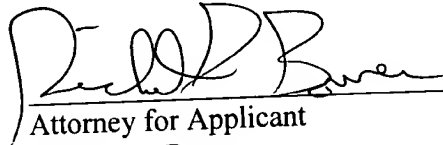
The fee has been calculated as shown below:

| CLAIMS AS AMENDED | | | | | | |
|--|---|-------|---------------------------------------|------------------|----------------|-------------------|
| | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NO. PREVIOUSLY PAID FOR | PRESENT EXTRA | RATE | ADDITIONAL FEE |
| TOTAL CLAIMS | 34 | MINUS | 20 | = 14 | x \$ 9 \$18 | \$ 252.00 |
| INDEP. CLAIMS | 3 | MINUS | 3 | = 0 | x \$43 \$86 | \$ 0.00 |
| Fee for Multiple Dependent claims \$145°/\$290 | | | | | | |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT--- | | | | | | \$ 252.00 |

☐ Verified Statement claiming small entity status is enclosed, if not filed previously.

(April 6, 2004)

- ☐ A check in the amount of \$_____ is enclosed.
- ☒ Charge the amount of \$ 252.00 to Deposit Account No. 50-1710 to cover the additional claims fee. A duplicate copy of this sheet is enclosed.
- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. § 1.18 to Deposit Account No. 50-1710 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. §§ 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 50-1710. A duplicate copy of this paper is enclosed.
- ☒ Charge the amount of \$ 950.00 to Deposit Account No. 50-1710 to cover the Extension fee for response within three (3) months. A duplicate copy of this sheet is enclosed.
- ☐ Charge the amount of \$_____ to Deposit Account No. 50-1710 to cover the Information Disclosure Statement fee. A duplicate copy of this sheet is enclosed.
- ☒ Applicant's undersigned attorney may be reached in our Washington, D.C. office by telephone at (202) 625-3500. All correspondence should continue to be directed to our below-listed address.



Attorney for Applicant
Richard P. Bauer
Registration No. 31,588

PATENT ADMINISTRATOR
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